


APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention	SUB-LITHOGRAPHIC IMAGING TECHNIQUES AND PROCESSES		
Application Type : regular, utility			
Attorney Docket Number : BUR920030181US1			
Correspondence address:			
Customer Number:		44152	
Inventors Information:			
<u>Inventor 1:</u>			
Applicant Authority Type:	Inventor		
Citizenship:	JP		
Given Name:	Toshiharu		
Family Name:	Furukawa		
Residence:			
City of Residence:	Essex Junction		
State of Residence:	VT		
Country of Residence:	US		
Address-1 of Mailing Address:	Nine Oakwood Lane		
Address-2 of Mailing Address:			
City of Mailing Address:	Essex Junction		
State of Mailing Address:	VT		
Postal Code of Mailing Address:	05452		
Country of Mailing Address:	US		
Phone:			
Fax:			
E-mail:			
<u>Inventor 2:</u>			
Applicant Authority Type:	Inventor		
Citizenship:	US		
Given Name:	Mark		
Middle Name:	C.		
Family Name:	Hakey		

Residence:

City of Residence: Fairfax
State of Residence: VT
Country of Residence: US
Address-1 of Mailing Address: 15 Bellows Street
Address-2 of Mailing Address:
City of Mailing Address: Fairfax
State of Mailing Address: VT
Postal Code of Mailing Address: 05454
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 3:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Steven
Middle Name: J.
Family Name: Holmes
Residence:
City of Residence: Guilderland
State of Residence: NY
Country of Residence: US
Address-1 of Mailing Address: 103 Guilder Lane, Apt 11
Address-2 of Mailing Address:
City of Mailing Address: Guilderland
State of Mailing Address: NY
Postal Code of Mailing Address: 12084
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 4:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: David
Middle Name: V.
Family Name: Horak
Residence:
City of Residence: Essex Junction

State of Residence: VT
Country of Residence: US
Address-1 of Mailing Address: 47 Briar Lane
Address-2 of Mailing Address:
City of Mailing Address: Essex Junction
State of Mailing Address: VT
Postal Code of Mailing Address: 05452
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 5:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Charles
Middle Name: W.
Family Name: Koburger
Name suffix: III.
Residence:
City of Residence: Delmar
State of Residence: NY
Country of Residence: US
Address-1 of Mailing Address: 40 Roweland Avenue
Address-2 of Mailing Address:
City of Mailing Address: Delmar
State of Mailing Address: NY
Postal Code of Mailing Address: 12054
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 6:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Peter
Middle Name: H.
Family Name: Mitchell
Residence:
City of Residence: Jericho
State of Residence: VT

Country of Residence: US
Address-1 of Mailing Address: 390 Vermont Route 15
Address-2 of Mailing Address:
City of Mailing Address: Jericho
State of Mailing Address: VT
Postal Code of Mailing Address: 05465
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 7:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Larry
Middle Name: A.
Family Name: Nesbit
Residence:
City of Residence: Williston
State of Residence: VT
Country of Residence: US
Address-1 of Mailing Address: 458 Wildflower Circle
Address-2 of Mailing Address:
City of Mailing Address: Williston
State of Mailing Address: VT
Postal Code of Mailing Address: 05495
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 8:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: James
Middle Name: A.
Family Name: Slinkman
Residence:
City of Residence: Montpelier
State of Residence: VT
Country of Residence: US
Address-1 of Mailing Address: 882 North Street

Address-2 of Mailing Address:**City of Mailing Address:** Montpelier**State of Mailing Address:** VT**Postal Code of Mailing Address:** 05602**Country of Mailing Address:** US**Phone:****Fax:****E-mail:****Attorney Information:**

practitioner(s) at Customer Number:

44152



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Assignee 1:**Organization Name:** International Business Machines Corporation**Address-1 of Mailing Address:** New Orchard Road**Address-2 of Mailing Address:****City of Mailing Address:** Armonk**State of Mailing Address:** NY**Postal Code of Mailing Address:** 10504**Country of Mailing Address:** US**Phone:****Fax:****E-mail:**